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(1)	Fernand	o Godo							OFF	ICE US	E ONL	<u> </u>	
, ,	Name												
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		, FL 3301	. 2										
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(4)	Check app	propriate bo	k(es):										
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				(5) Re <sub>l</sub>	oort	Identifi	ers						· · · · · · · · · · · · · · · · · · ·
Cove	er Period:	From 10	/ 02	/ 21	То	10	/ 15	1	21	Rep	ort Typ	e: G2	2
XO	riginal	☐ Am	endment		Spe	ecial Elec	tion Re	port -				<del> </del>	
(6)	Contributi	ons This R	eport			(7)	Expen	ditur	es Thi	is Rep	ort		
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Loar	าร	<u>    \$                                </u>	· · · · · · · · · · · · · · · · · · ·	500.00		Transf Office	ers to Accoun	nt		\$	0 .	.00	
Tota	l Monetary	\$		1850.00									
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☐ Individual (only for IE				☑ Candidate ☐ Chairperson (only for PC and PTY)									
or electioneering comm.)								1	τ				
x Southfur						$\mathbf{x}$							
Si	Signature						ature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Fernando Godo (2) I.D. Number									
(3) Cover Period 10 / 02 / 21 through 10 / 15 / 21 (4) Page 1 of 1									
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount		
10/10/2021	Godo, Fernando 4271 W 18 Ct	s	Self	LOA			\$500.00		
1	Hialeah, FL 33012								
10/12/2021	Palacios, Rosie PO BOX 940952	ı	Account-	CHE	·		\$100.00		
2	·		Ing						
10/12/2021	Metal Fence Supply Corp	В	Metals	СНЕ			\$500.00		
3	8436 NW 61 St Miami, FL 33166						, , , , , , , , , , , , , , , , , , , ,		
10/12/2021	Suarez, Cynthia 5881 W 3 Ave	I	Health-	СНЕ			\$500.00		
4	Hialeah, FL 33012		care				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
10/12/2021	Majestic Party Rental Inc	В	Event	СНЕ			\$250.00		
5	1690 W 38 Place, Ste 83 Hialeah, FL 33012		Planning				720000		
, ,									
, ,									

//	NOTHING	TO	REPORT	ON	THIS	FORM	//	9700	
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Fernando Godo	(2) I.D. Number
(3) Cover Period 10 / 02 / 21 through 10 / 15 / 21	(4) Page1 of1

(5)	(7)	(8)	(9)	(10)	(11)
(5) Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	
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